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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/686,467	<b>FILING DATE</b> 10/12/2000 <b>RULE</b> -	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2614	<b>ATTORNEY DOCKET NO.</b> 2000_1420	
<b>APPLICANTS</b> Mitsuaki Oshima, Kyoto-shi, JAPAN; Seiji Sakashita, Osaka, JAPAN;  <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A REI OF 08/240,521 05/10/1994 PAT 5,600,672 WHICH IS A CIP OF 07/857,627 03/25/1992 ABN  <b>** FOREIGN APPLICATIONS *****</b> JAPAN 03-62798/1991 03/27/1991 JAPAN 03-95813/1991 04/25/1991 JAPAN 03-155650/1991 05/29/1991 JAPAN 03-182236/1991 07/23/1991 JAPAN 04-60739/1992 03/17/1992 JAPAN 05-132984/1993 05/10/1993 JAPAN 05-261612/1993 09/24/1993 JAPAN 05-349972/1993 12/27/1993 JAPAN 06-79668 03/24/1994  <b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 11/30/2000</b> -					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 178	<b>TOTAL CLAIMS</b> 9	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b>  Wenderoth Lind & Ponack 2033 K Street Suite 800 Washington ,DC 20006					
<b>TITLE</b> Communication system					

<b>FILING FEE RECEIVED</b> 1080	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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